Revision HCFA-AT-80-38 (BPP)

STATE MONTANA

<u>Citation</u> 42 CFR 431.11

1.2 Organization for Administration

- (a) <u>ATTACHMENT 1.2-A</u> Contains a description of the organization and functions of the Medicaid agency and an organization chart of the agency.
- (b) Within the state agency, the Medicaid Services Division has been designated as the medical assistance unit. ATTACHMENT 1.2-B contains a description of the organization and functions of the medical assistance unit and an organization chart of the unit.
- (c) <u>ATTACHMENT 1.2-C</u> contains a description of the kinds and numbers of professional medical personnel and supporting staff used in the administration of the plan and their responsibilities.
- (d) Eligibility determinations are made by State or local staff of an agency other than the agency named in paragraph 1.1(a). ATTACHMENT 1.2-D contains a description of the staff designated to make such determinations and the functions they will perform.

/X/ Not applicable. Only staff of the agency named in paragraph 1.1(a) make such determinations.

TN <u>#94-02</u> Supersedes TN <u>#81-12</u>